

PATENT

11-19-02

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Lino R. Becerra, et al.

Application No. : 09/822,585

Filed : March 30, 2001

Entitled : METHOD AND APPARATUS FOR
OBJECTIVELY MEASURING PAIN, PAIN
TREATMENT AND OTHER RELATED
TECHNIQUES

Docket No. : MGH-004BUS

Group Art Unit: 3737

Examiner: S. Shaw

NOV - 7 2002
TECHNOLOGY CENTER 2000
RECEIVED
NOV 05 2002

Certificate of Mailing (37 C.F.R. 1.8(a))

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on the date set forth below.

24 OCT 02
Date of Signature
and Mail Deposit

By: Christopher S. Daly
Christopher S. Daly
Reg. No. 37,303
Attorney for Applicant(s)

RESPONSE

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

In response to the Restriction Requirement dated September, 24, 2002, Applicant hereby elects the Group I claims (Claims 1-30).

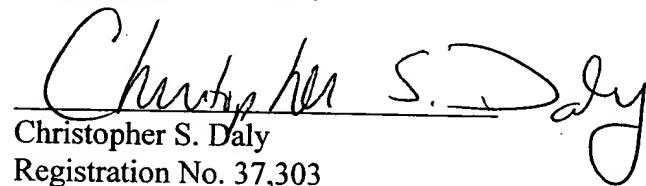
If the Examiner has any questions regarding this amendment or this application, he is respectfully invited to telephone the undersigning attorney.

Application No.: 09/822,585
Filed: March 30, 2001
Group Art Unit: 3737
Atty Dkt No.: MGH-004BUS

The Assistant Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 500845.

Respectfully submitted,

Dated: 24 Oct 02



Christopher S. Daly
Registration No. 37,303
Attorney for the Applicant(s)
Daly, Crowley & Mofford, LLP
275 Turnpike Street - Suite 101
Canton, MA 02021-2310
Telephone: (781) 401-9988
Facsimile : (781) 401-9966

Q:\mgh\004bus (breiter - 1579\mgn-004bus respns 16Oct02.doc



3737

Please type a plus sign (+) inside this box →

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/822,585
		Filed On	March 30, 2001
		First Named Inventor	Lino R. Becerra
		Group Art Unit	3737
		Examiner Name	Shawna J. Shaw
Total Number of Pages in This Submission	3	Attorney Docket Number	MGH-004BUS

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return-receipt postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

In the event a petition for extension of time is required by this paper and not otherwise provided, such petition is hereby made and authorization is provided herewith to charge deposit account No. 50-0845 for the cost of such extension.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Christopher S. Daly	Reg. No. 37,303
Signature		
Date	24 OCT 02	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

Typed or printed name	Christopher S. Daly
Signature	
Date	24 OCT 02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.